## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

| H  |  |  | ·   |                                      |                     | - ·  |         |                     |                        | $\underline{V}$  | J8 16               | 107                      |
|--|--|--|---|--------------------------------------|---------------------|--|---------|---------------------|------------------------|------------------|---------------------|--------------------------|
| CLAIMS AS FILED - PART I   |  |  |   |                                      |                     |  |         | SMALL ENTITY TYPE   |                        |                  | OTHER               |                          |
| ILS MATIONAL CTACE SEE   |  |  | (Colum  | n 1)                                 |                     | (Column 2)                                       | 7       |                     |                        | OR<br>7          | SMALL               | ENTITY                   |
| U.S. NATIONAL STAGE FEES   |  |  | <u> </u>  |                                      |                     |  |         | . RATE              | FEE                    | _                | RATE                | FEE                      |
| BASIC FEE  |  |  | SMALL ENT   |                                      | LAR                 | GE ENT. = \$ 300                                 |         | BASIC FEE           |                        | OR               | BASIC FEE           | 3(1)                     |
| EXAMINATION FEE  |  |  | Satisfies PCT A<br>(4) = \$ 50  | /\$ 100                              |                     | ther situations =<br>\$ 100 / \$ 200             |         | EXAM. FEE           |                        |                  | EXAM. FEE           | 20                       |
| SEARCH FEE   |  |  | U.S. Is ISA = \$50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |                                      |                     | other situations =<br>\$ 250 / \$ 500            |         | SEARCH FEE          |                        |                  | SEARCH FEE          | (40)                     |
| FEE FOR EXTRA SPEC. PGS.   |  |  | minus 100'=   |                                      |                     | /50 =  | ]       | X \$ 125 =          |                        | 1                | X \$ 250 =          | 1,00                     |
| TOTAL CHARGEABLE CLAIMS  |  |  | 14 min  | nus 20 =                             | *                   | <del>*************************************</del> | 1       | X \$ 25 =           |                        | OR               | X \$ 50 =           | <del> </del>             |
| INDEPENDENT CLAIMS   |  |  | <u> </u>  | inus 3 =                             | •                   |  |         | X \$ 100 =          |                        | OR               | X \$ 200 =          |                          |
|  |  | IDENT CLAIM PR   |   |                                      |                     |  |         | + \$ 180 =          |                        | OR               | + \$ 360 =          |                          |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |  |   |                                      |                     |  | TOTAL   |                     | OR                     | TOTAL            | Gui                 |                          |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |  |   |                                      |                     |  | SMALL E | ENTITY              | OR                     | OTHER<br>SMALL ( |                     |                          |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |   | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | BER<br>USLY         | PRESENT<br>EXTRA                                 |         | RATE                | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE / |
|  | Total                                    | SAME   | Minus   | **                                   |                     | =  |         | X \$ 25 =           |                        | OR               | X \$ 50 =           | /                        |
|  | Independent                              | . /////  | Minus   | ***                                  |                     | =  |         | X \$ 100 =          |                        | OR               | X \$ 200 =          | 1                        |
| _  | FIRST PRES                               | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                      |                     |  |         | + \$ 180 =          |                        | OR               | + \$ 360 =          | $\mathcal{T}$            |
|  |  |  |   |                                      |                     |  | _       | TOTAL ADDIT.<br>FEE |                        | OR               | TOTAL ADDIT.<br>FEE |                          |
|  |  | (Column 1)   |   | (Colum                               | n 2)                | (Column 3)                                       |         |                     |                        |                  |                     |                          |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |   | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO | ER<br>JSLY          | PRESENT<br>EXTRA                                 |         | RATE                | ADDI-<br>TIONAL<br>FEE |                  | RATE                | ADDI-<br>TIONAL<br>FEE   |
|  | Total                                    |  | Minus   | **                                   |                     | =  |         | X \$ 25 =           |                        | OR               | X \$ 50 =           |                          |
|  | Independent                              | •  | Minus   | ***                                  |                     | =  |         | X \$ 100 =          |                        | OR               | X \$ 200 =          |                          |
|  | FIRST PRESI                              | ENTATION OF MI   | JLTIPLE DEPE  | NDENT CL                             | .AIM                |  |         | + \$ 180 =          |                        | OR               | +\$ 360 =           |                          |
|  |  |  |   |                                      |                     |  | ٦       | FEE                 |                        | OR               | TOTAL ADDIT.<br>FEE |                          |
| ••••   | f the "Highest Nur<br>f the "Highest Nur | mn 1 is less than the<br>mber Previously Paid<br>mber Previously Paid<br>ber Previously Paid I | For IN THIS SPA   | ACE is less t                        | han '20'<br>han '3' | ', enter "20".<br>enter "3"                      | In the  | appropriate box     | in column 1.           |                  | ·                   |                          |